

Coatesville Veterans Affairs Medical Center

DOCTORAL INTERNSHIP PROGRAM IN HEALTH SERVICES PSYCHOLOGY



2020-2021

**Department of Veterans Affairs Medical Center
1400 Blackhorse Hill Road, Psychology Services, 116B
Coatesville, PA 19320-2096**

VISN 4



Psychology Internship Program

Coatesville VA Medical Center

Psychology Services (116)

1400 Blackhorse Hill Rd.

Coatesville, PA 19320

(610)384-7711

<https://www.coatesville.va.gov/>

APPIC Match Number:

General Track: 152911

Neuropsychology Track: 152912

Applications due: November 5, 2020

Accreditation Status

The doctoral internship at the Coatesville VA Medical Center (CVAMC) is accredited by the Commission on Accreditation of the American Psychological Association. Our last accreditation site visit was in 2016 and the next accreditation site visit will be held in 2023. Questions regarding the accreditation process and status may be addressed to:

American Psychological Association
Office of Program Consultation and Accreditation
750 First Street, NE
Washington, DC 20002-4242
Phone Number: (202) 336-5979

Application & Selection Procedures

Eligibility

Doctoral students in APA or CPA accredited Clinical or Counseling Psychology programs are eligible to apply. All coursework required for the doctoral degree must be completed prior to the start of the internship year, as well as any qualifying, comprehensive, or preliminary doctoral examinations. We prefer candidates whose doctoral dissertations have been proposed. Persons with a PhD in another area of psychology who meet the APA criteria for re-specialization training in Clinical or Counseling Psychology are also eligible.

VA requirements specify that eligible applicants must be U.S. citizens and have fulfilled departmental requirements for internship as certified by their Directors of Clinical Training. The Coatesville VA Medical Center is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes. We welcome and strive to select candidates representing different kinds of programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences.

If selected to be an intern at this or another VA site, a Certification of Registration Status, Certification of U.S. Citizenship, and drug screening are required as part of onboarding. We cannot consider applications from anyone who is not currently a U.S. citizen. Thus, all interns must complete a Certification of Citizenship in the United States and the Federal Government also requires that male applicants to VA positions who were born after 12/31/59 must sign a Pre-appointment Certification Statement for Selective Service Registration, prior to beginning the internship. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns are not required to

be tested prior to beginning work, but once on site they are subject to random selection in the same manner as other staff.

Application Procedure and Requirements

All applications should be submitted through the APPIC portal by midnight EST **November 5th**.

General Track (3 positions): 152911

1. A completed online APPIC Application for Psychology Internship (AAPI) <http://www.appic.org>
2. A cover letter indicating the track for which you are applying and the rotations you are interested in
3. A detailed curriculum vitae or résumé
4. Three letters of recommendation
5. Official transcripts of all graduate work

Neuropsychology Track (2 positions): 152912

1. A completed online APPIC Application for Psychology Internship (AAPI) <http://www.appic.org>
2. A cover letter indicating the track for which you are applying
3. A detailed curriculum vitae or résumé
4. Three letters of recommendation
5. Official transcripts of all graduate work
6. A sample neuropsychological test battery report, with identifying information removed

It is important for applicants to the neuropsychology track to know that individuals who have been invited to interview in the past have usually participated in multiple neuropsychological practicum training experiences.

Candidate Interviews

Candidates will be informed via email by **December 4, 2020** if they have been invited to interview. Interviews are typically held in January and last most of the day. In lieu of COVID-19 all interviews will be conducted virtually in January. Dates and times for interviews will be forthcoming when applicants are invited to interview.

Questions regarding application or additional information should be forwarded to:

Amanda S. Vaught, Psy.D.
Director of Psychology Training
Coatesville VA Medical Center
1400 Blackhorse Hill Road
Coatesville, PA 19320
Amanda.vaught@va.gov

OR

Elizabeth Phelps, Psy.D.
Assistant Director of Training
Coatesville VA Medical Center
1400 Blackhorse Hill Road
Coatesville, PA 19320
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The training setting

The Coatesville Veterans Affairs Medical Center (CVAMC) is located one mile south of the U.S. Route 30 Bypass, in the town of Coatesville in Chester County, PA. Coatesville is approximately 20 minutes west of West Chester, the county seat of Chester County and home to West Chester University. West Chester uniquely combines small-town charm with metropolitan flair. Downtown West Chester has been listed on the National Register of Historic Places and recognized as a Distinctive Destination by the National Trust for Historic Preservation. The main streets of West Chester have more than 120 shops, boutiques, and eateries which fill the storefronts of Gay, Market, and High Streets. Many previous interns have chosen West Chester for their home during internship year because of its proximity to the Coatesville VA Medical Center, the multitude of short-term housing options, and the desirability of the location.

Approximately 40 miles east of Coatesville is Philadelphia, the 5th largest city in the United States. Philadelphia, referred to as "the city of brotherly love" is the birthplace of American democracy and the nation's first capital. Both New York City and Washington DC are within driving distance from Philadelphia and easily accessible via Amtrak. For beach lovers, most New Jersey shore points are within a two hour drive. For a contrast to the big city, one can travel to Lancaster (part of Pennsylvania Dutch Country) which is 30 miles west of Coatesville. The Pennsylvania Amish of Lancaster County are America's oldest Amish settlement, where thousands still live a traditional Amish lifestyle (while driving in Lancaster you will surely pass a horse and buggy). Visit markets and farm stores for a homemade shoofly pie or hand-made Amish crafts or enjoy the famous hiking and biking trails.

Coatesville VAMC opened in November 1930 and is one of the network of 152 hospitals operated by the Department of Veterans Affairs to provide health care to the veteran population, on both an inpatient and outpatient basis. In addition, CVAMC serves veterans at two Community Based Outpatient Clinics (CBOC) in Spring City PA, and Delco, PA. Many psychologists work as members of mental health interdisciplinary teams, as well as hold additional leadership responsibilities. Besides the training conducted by the Psychology Service, the Medical Center offers training programs for psychiatry and podiatry residents, social work, nursing, primary care, pharmacy and a variety of other health-related professions.

Both service-connected and non-service-connected veterans are eligible for services at the Medical Center and its community-based outpatient clinics. The patient population is diverse, encompassing veterans recently discharged from the service as well as those who served in Vietnam. Presenting problems and diagnoses vary greatly among the patients.

COVID-19

The COVID-19 pandemic has created numerous personal and professional challenges for all of us. Amidst multiple challenges that come with the unknown or what the future will bring, one the largest challenges has been how to effectively and competently provide training during this trying time. In March 2020, we quickly moved our 2019-2020 trainees to telework and telehealth service delivery from home, where they complete the remainder of their training year. Our 2020-2021 trainees are completing at least the first part of their internship year virtually.

The Coatesville VA Medical Center psychology training program provides transparent and effective communication regarding our program and training opportunities. As such, we cannot definitively predict rotation availability or if telework will be available for the 2021/2022 training year as this is dependent on ever changing guidance. We remain committed to having the physical and emotional well-being, safety, and professional development of our trainees as a top priority. We also understand that COVID-19 has impacted many applicants' accrual of hours and research productivity and will take this into account as we evaluate applications.

We can say with confidence that there will likely be an increase in telehealth opportunities and tailoring treatment intervention and assessment to this platform. Additionally, we do not expect that there will be any significant changes to our base clinical services or populations served through rotations and adjunct experiences.

Telework

Due to the location of our hospital as well as staff and trainees coming from highly populated areas, our leadership has granted telework agreements to both staff and trainees. This privilege is contingent on appropriate telework set-up, trainee needs, and compliance with the telework and telesupervision expectations that we have created for both trainees and staff. Similar to the ever changing guidance with COVID-19, telework is not guaranteed for the 2021/2022 year, but may be an option should it be considered necessary to keep staff safe by our leadership. Additionally, there are some rotations where

presence in the clinic or on the unit is required. All trainees will be issued VA laptops and will be provided with card readers to ensure that any transitions to and from the hospital are as seamless as possible.

Personal Protective Gear

Should trainees be expected to return to the hospital to see patients in-person, they will be supplied with a mask and either goggles or a face shield. Trainees will also be provided with Clorox wipes and hand sanitizer.

Training Model and Program Philosophy

The internship program adheres to the **Practitioner–Scholar Model**, emphasizing the mutuality of science and practice and the practical application of scholarly knowledge. The model promotes clinical practice guided by theory and research. Students are trained to be psychologists who think critically and engage in disciplined inquiry. The primary goal of training a practitioner-scholar is the delivery of human services that takes into account individual, cultural, and societal considerations, consistent with the principles of evidence-based psychological practices.

The staff psychologists involved in intern training represent various theoretical orientations, assuring exposure to diverse training experiences. Integral to the internship is the application of clinical research to patient care, while under close supervision. Skill-building seminars, role-modeling, observation, professional education, and consultative guidance are used as supplementary learning methods. Diversity issues are considered in all settings throughout the internship.

The program takes a developmental view of training, transitioning interns from their graduate student status to that of independently functioning entry-level psychologists. Upon completion of the internship, interns will have demonstrated technical competencies derived from supervised experience in: application of human diversity and ethical concepts to practice; diagnostic interviewing; individual and group psychotherapy; psychological assessment; and specialized techniques such as biofeedback, or neuropsychological or geropsychological assessment, depending on the interests of the intern. The interns will have extensive exposure to the operation of a large inpatient psychiatric setting and to the psychologists' many roles as administrators, clinicians, teachers, researchers, and consultants. Interns will also have direct experience with the multidisciplinary team approach to the treatment of mental health problems, common to many treatment facilities.

Program Goals and Objectives

The primary aim of the CVAMC internship is to prepare diverse doctoral-level psychology trainees to function competently and ethically in professional roles in the field of psychology that combine clinical service and scholarly inquiry. Within the Practitioner-Scholar model, we aspire to prepare interns to transition successfully to postdoctoral training programs or to secure entry-level employment in psychology at the GS-11 or equivalent level, according to their prior experiences and future career goals.

The program emphasizes training in clinical skills, with the recognition that competent clinical work is informed by science. Supervision and didactics are grounded in the current evidence base and strong efforts are made to expose interns to current research and scholarship. The training program is a sequential, competency-based model leading to the development of Practitioner-Scholar psychologists. Competency evaluation begins during orientation with further evaluations at the beginning, midpoint, and end of each rotation.

The underlying philosophy, goals, and objectives profoundly affect the interaction between staff and interns. Interns are trained and encouraged to move toward autonomous functioning as professional psychologists in a Practitioner-Scholar model. The training program emphasizes the active involvement of the intern in choosing training assignments, participating in training seminars and workshops, and in providing input into the internship program. Interns are provided ongoing evaluation and feedback to assist them with self-monitoring their progress toward autonomy.

In accordance with this primary aim, the CVAMC internship program strives to promote interns' development of the profession-wide competencies identified by the APA's Standards of Accreditation in Health Service Psychology:

Research/Integration of Science and Practice

Ability to demonstrate critical evaluation and disseminate research or other scholarly activities (e.g., case conference, presentation, publications) at the local, regional, or national level. Integrates current research into clinical practice in relevant ways.

Ethical and Legal Standards

Ability to demonstrate knowledge and acts in accordance with current version of APA ethical principles of psychologist and code of conduct. Demonstrates knowledge of and acts in accordance with relevant laws, regulations, rules, professional standards at the organizational, local, state, regional and federal levels. Ability to recognize ethical dilemmas as they arise and applies ethical decision-making processes in order to resolve the dilemmas and conducting one's self in an ethical manner.

Individual and Cultural Diversity

Demonstrates an understanding of how one's own persona/cultural history, attitudes, and biases may affect how they understand and interact with people different from themselves. Using awareness and knowledge of individual and cultural differences in the conduct of professionals roles, including the ability to work effectively with an individual whose group membership, demographic characteristics, or worldviews create conflict with their own. Demonstrates knowledge of current theoretical and empirical knowledge as it related to addressing diversity in all professional activities including research training supervision/consultation and service.

Professional Values and Attitudes

Behaves in ways that reflect the values and attitudes of psychology, including integrity, deportment, professional identity, accountability, lifelong learning, and concern for the welfare of others. Engages in self-reflection regarding one's personal and professional functioning and engage in activities to maintain and improve performance, well-being, and effectiveness. Actively seeks and demonstrate responsiveness to feedback and supervision and respond professionally in increasingly complex situations with greater degree of independence while progressing across levels of training.

Communication and Interpersonal Skills

Develops and maintains effective relationships with a wide range of individuals, including colleagues, communities, organizations, supervisors, peers, and Veterans and their families. Produces and comprehends verbal, non-verbal and written communications that are informative and well-integrated; demonstrates a thorough grasp of professional language and concepts. Demonstrates effective interpersonal skills and the ability to manage difficult communication well.

Assessment

Selects and applies assessment methods that draw from the best available empirical literature and that reflect the science of measurement and psychometrics. Collects relevant data using multiple sources and methods appropriate to the identified goals and questions of the assessment as well as relevant diversity characteristics of the service recipient. Interprets assessment results, following current research and professional standards and guidelines that inform case conceptualization, classification, and recommendations, while guarding against

decision-making biases, distinguishing the aspects of assessment that are subjective from those that are objective. Ability to communicate orally and in written documents the findings and implications of the assessment in an accurate and effective manner sensitive to a range of audiences.

Intervention

Establishes and maintains effective relationships with recipients of psychological services. Develops evidence-based intervention plans specific to the service delivery goals. Implements intervention informed by the current scientific literature, assessment findings, diversity characteristics, and contextual variables. Demonstrates the ability to apply the relevant research and literature to clinical decision-making. Modifies and adapts evidence-based approaches effectively when clinical indicated or when clear evidence base is lacking. Evaluates intervention effectiveness and adapts the intervention goals and methods consistent with ongoing evaluation.

Supervision

Applies knowledge of supervision models and practices in direct or simulated practice with peers or with other health professionals.

Consultation and Interprofessional/Interdisciplinary Skills

Demonstrates knowledge of and respect for the roles and perspectives of other professionals. Applies this knowledge in a direct or simulated consultation with individuals and their families, other health care professionals, interprofessional groups, or systems related to health and behavior.

Evaluation

Evaluation of progress

Interns are continuously evaluated throughout the training year, with formal evaluation completed at mid-rotation and end of rotations by all supervisors. Evaluation focuses on the successful demonstration of profession-wide competencies and site-specific competencies. All competency areas will be rated at a level of competence level of 3 or higher. Items rated as level 1 or 2 will require implementation of a remediation plan. By end of training (3rd rotation evaluations), intern will have achieved a rating of 4 or higher on all profession-wide competencies and 3 or higher on all relevant site-specific competencies.

Interns' Evaluation of Training Program

Throughout the internship, interns evaluate aspects of the training program in various ways:

- It is hoped that interns will engage in ongoing informal dialogue with their training supervisors and with the Director of Training about their experiences, concerns, and suggestions.
- Each rotation represents an opportunity to evaluate both that portion of the internship and the supervisor on specific dimensions, and to write a critique of the rotation as a training experience.
- In the final weeks of the internship, the interns are also given a group task of writing a free-text document incorporating their collective evaluation and recommendations for the internship program as a whole.
- In addition, the intern class may also participate in a Training Retreat with the training psychologists, reflecting on selected aspects of the program and its processes, and making suggestions for improvements.

Compensation and Benefits

The Psychology Internship Program is funded by the Office of Academic Affairs of the Department of Veterans Affairs Central Office as an annual training program. The stipend as of August, 2020 is \$28,418.00. Interns also are eligible for the full range of health and life insurance options available to all federal employees. As with staff psychologists, professional liability coverage for all mandated intern activity is provided by the Federal Tort Claims Act. Benefits include 10 Federal holidays and accrual of 13 days of annual (vacation) leave, and 13 days of sick leave. Authorized absence may be requested for reasonable educational purposes (i.e. conference, dissertation defense, postdoc interviews) and is granted at the discretion of the Director of Training in consultation with the rotation supervisor.

Program Structure

The internship year is divided into four-month trimesters (rotations), at least one of which will provide core training experiences in the intern's area of concentration. Note, however, that no intern may spend more than 50% of their rotations in a single specialty area. All interns must complete a half-time rotation in the behavioral health interdisciplinary program (BHIP) and complete at least 6 psychological assessments throughout the year.

Interns matched to the Neuropsychology Track receive concentrated training in that area. They are required to complete the Neuropsychology I (half-time) and II (full-time) rotations. The remaining training experiences are drawn from the electives below.

Interns matched to the General Psychology Track have considerable flexibility in tailoring the training to their interests. Experiences are required in psychological assessment and outpatient psychotherapy as mentioned above. The remaining training experiences are drawn from the electives below.

Psychology Interns typically spend approximately 8 hours per week in other training program requirements (i.e. didactics, meetings, etc.), which leaves 32 hours per week for clinical training rotations. This number may vary depending on rotations that require more frequent inter/multidisciplinary meetings. Thursdays are structured to allow times for didactics, journal club, meeting with the DOTs, and group case consultation. Interns will also attend scheduled CE presentations provided by our local CE committee. Presentations vary in frequency and span an afternoon. Topics range from updates on assessment, to ethical considerations, to diversity, to nuances in evidence-based practice. Occasionally, interns may also have the opportunity to participate in a day long or multiple day long workshop. These workshops are not guaranteed and are approved by the Director of Training if they match the goals of the intern for their internship year. There will also be unstructured time for catching up on notes/readings, working on dissertation, and other clinical activities or duties that you would like to be involved in.

Professional Presentations

All interns are required to conduct two professional presentations over the course of the year. During the first or second rotation, interns will each provide one clinic presentation to a clinic of their choice. Clinic presentations need to be completed prior to the mid-point of the internship year. Toward the end of the training year, each intern will prepare a formal psychology continuing education (CE) presentation of 45 minutes to 1 hour duration, prepared/presented independently. The psychology continuing education (CE) presentation must undergo the formal process of applying through the hospital's CE committee, which reviews proposals and accompanying materials to enable attendees of the presentation to obtain APA CE credits.

Didactics

In addition to the clinical rotations and individual supervision, further training is provided in core areas through a series of seminars conducted throughout the internship year by members of the training committee and guest speakers. The seminars integrate clinical data, research findings, supervisory input, and group discussion. To increase the number and types of seminars offered to the interns each seminar

topic once a month (see table below for same schedule). All participants in the didactic seminar complete an evaluation form for each didactic, which is a valuable part of continuous quality improvement.

Week 1	Professional Development (1 hour) Peer Consultation (Supervision Skills) (1 hour);
Week 2	Psychotherapeutic Interventions (2 hours weekly)
Week 3	Ethics & Diversity (2 hours weekly)
Week 4	Psychological Assessment (2 hours weekly)

Psychological Assessment Seminar

Assessment Seminars will provide a broad survey of assessment-related topics spanning from general to specific issues. Broad areas typically addressed include clinical interviewing, mental status exams, diagnostic considerations, cultural formulations, confirmatory bias, and functional behavioral assessments. In the past, specialty topics have included discussion of the MMPI-2RF, Personality Assessment Inventory, Primary Care-Mental Health Integration, CAPS-5, neuropsychology for the non-neuropsychologist, issues in the assessment of couples & families, complex differential diagnoses, and traumatic brain injury.

Psychotherapeutic Interventions Seminar

Interns will gain knowledge regarding various models of case conceptualization and associated clinical interventions, including numerous evidence based practices. EBP's reviewed include CPT, PE, IPT, CBT-I, BFT, IMRT, SST, TLDP, DBT, MI, ACT, IBCT, CBCT, UP, and EMDR, among others. Seminar activities include: 1) discussions of clinical topics; 2) modeling and role-playing of intervention techniques; 3) reading and discussing professional articles; and 4) application of knowledge via clinical vignette exercises.

Diversity and Ethics in the Context of Clinical Practice

The seminar consists primarily of presentations by psychology staff or other select members of the staff at CVAMC. Topics cover a wide range of issues that cover a synthesis of ethics, diversity and professional issues that psychologists may face in their daily practice and discussion is encouraged and required by all present for the seminar. It incorporates a review of the APA ethics code and includes discussion on common ethical dilemmas faced by psychologists, including opportunities for interns to identify and discuss diversity issues and ethical problems they are currently facing or have already faced in the work setting.

Peer Consultation (Supervision Skills) Seminar

The internship program also includes the opportunity to gain experience in skills needed for doing clinical supervision, using a Peer Consultation model. Each intern experiences the roles of both the peer consultee and the peer consultant during the program. The interns' development as clinical consultants will be guided by staff psychologists, during peer consultation groups. Appropriate readings and group discussions on theoretical and process issues also aid in the interns' development as clinical consultants.

Professional Issues Seminar

The Professional Development Seminar will provide interns with a space to reflect on their current training experiences (e.g., adjusting to internship, coping with burnout, responding to difficult clinical situations), as well as plan for future training and their careers (e.g., applying to postdoctoral fellowships and jobs, interviewing skills, preparation for EPPP and licensure). Topics will be adjusted to meet the specific needs of the training class and may also incorporate discussions of diversity and ethics as they apply to professional development (e.g., women in leadership, informed consent, navigating the HATCH act).

Group Case Consultation

Case consultation is constructed as a professional, non-evaluative environment in which interns present and provide feedback on current cases they are seeing for therapy or assessment. The focus of case consultation is case conceptualization from a developmental, bio-psycho-social model. Meeting weekly, case consultation also provides structure in-line with the developmental model of supervision. The format of the meeting starts off very structured in which interns are engaged in a round robin providing feedback on a single case. This structure enables all interns the opportunity to provide feedback and aids the individual request feedback time to thinking and process, feedback from his/her peers. By the end of the year, interns will be presenting cases and receiving feedback, naturally, with minimal structure.

Typical Thursday Schedule:

7:30/8-10 – Unstructured Time/Notes/Readings/Treatment Teams (if applicable)
10-12 – Didactics
12-1 – Lunch
1-2 – Journal Clubs (separate for General and Neuro Track interns)
2-3 – Meeting with DOTs
3-4 – Group Case consultation
4 – End of day (if tour started at 7:30)
4-4:30 – Unstructured Time (if tour started at 8)

Diversity sub-committee

The Coatesville VAMC is dedicated to training culturally sensitive services, supervision, and training in such. Our diversity sub-committee, chaired by Dr. Gabriel Longhi and comprised of both supervisors and interns, have been working to increase awareness of personal bias by engaging in non-defensive self-reflection. While we are in the infancy stages of rolling out Local Reflective Practice created by Evelyn Sandeen (Sandeen, E., Moore, K.M., & Swanda, R.M., 2018), interns are highly encouraged to attend and be actively involved as it has proven to be mutually beneficial for the intern's learning and the program's continued development in the area of diversity.

Placement Selection

The first week of the internship is dedicated to a week of orientation. During this week interns are provided with an overview of the medical facility and have the opportunity to meet with and learn more about supervisors and rotations. At the end of orientation, the interns meet individually with the director and assistant director of training and discuss training goals, long-term goals, and rotations/supervisors that they believe would help them achieve their goals. The DOT and ADOT assist in developing a changeable schedule for the year that would meet their needs based on rotation and supervisor availability.

Training Experiences

Behavioral Health Interdisciplinary Program (BHIP)/Evidence Based Practices (EBP)

Dagmawi Dagnew, PsyD, Jeffrey Schweitzer, PhD, Carmella Tress, PsyD, Amanda Vaught, PsyD, and Catherine Wallace, PsyD

This is a required half-time rotation for all interns. The requirements of the outpatient psychotherapy rotation can also be fulfilled through the CBOC or Couples and Family Program rotations*

BHIP is a generalist outpatient mental health clinic that serves a wide array of presenting problems. During this rotation a holistic, recovery-oriented approach to treatment is emphasized. Interns implement case conceptualization that adheres to the specific that is in line with the veteran's goals, needs, and preferences. Interns will gain foundational knowledge with specific EBPs through reading and practice exercises, case conceptualization, role play, and recording of sessions to hone skills in particular

interventions that comprise the relevant EBP. Typical EBPs provided are: CBT, ACT, exposure based therapy, CPT, PE, CBT-I, Unified Protocol, IPT and time-limited dynamic therapy. Assessment opportunities range from a semi-structured interview to a personality assessment, based on the presenting problem of the Veteran. Interns will also collaborate with other members of a treatment team including family or other disciplines from the medical center such as nursing, psychiatry, Suicide Prevention, and peer support.

The BHIP rotation is home to the DBT team, which is a full Linehan model program that includes skills group, individual therapy, phone coaching, and weekly consultation team meeting. The DBT team is made of providers from differing parts of the hospital. We also provide consultation and education to differing teams through the hospital who may be also providing services to one of our DBT patients. The DBT program is young in its creation, so interested interns will have an opportunity to learn and train, but have the opportunity to observe and/or contribute to the development of the program. Interns interested in DBT should elect to do two, back-to-back half rotations or an enrichment experience.

Community Based Outpatient Clinic (CBOC)

Leanne Valentine, PhD

This generalist rotation serves rural Veterans with a wide variety of presenting concerns. This rotation is offered as either a full-time or half-time rotation in our Spring City CBOC. The CBOC serves Veterans from all eras with a range of presenting problems. Veterans are seen for assessment and diagnosis, short-term and long-term therapy. Caseloads are varied, with opportunities to utilize several different EBPs in both group and individual formats such as: Cognitive Behavioral Therapy, Cognitive Processing Therapy, Prolonged Exposure, CBT-Insomnia, Seeking Safety. Collaboration and consultation with other disciplines is frequent and provides ample opportunity for the intern to develop consultation skills. Interns will also get experience working in a busy primary care clinic and have opportunities to see “walk-ins” for brief consultation, support, education and referral. Interns may also work with couples and/or develop group therapy programming if that is of interest.

Couple and Family Program

Catherine Wallace, PhD

Interns in this rotation will gain valuable experience in assessing and intervening on relationship-oriented problems, which would be directly applicable to their work on other rotations and in their future career. Interns will learn evidence-based treatments for couples, which includes an emphasis on learning how to thoroughly assess relationship dynamics and goals for couple therapy. The primary intervention of focus will be Integrative Behavioral Couple Therapy (IBCT), which includes a 4-session assessment and feedback phase and requires interns to develop a theoretically driven case formulation. This is followed by the intervention phase, utilizing cognitive-behavioral and acceptance-based approaches. Interested interns may also learn the protocol for Cognitive Behavioral Conjoint Therapy (CBCT) for PTSD, which is a 15-week, couples-based PTSD treatment. There are opportunities for co-facilitating groups as well, which may include co-facilitating the monthly PTSD 101 for Family and Friends group, potentially joining the Parenting STAIR group, or co-facilitating other programs that have begun by that time. The Couple & Family Program is in a significant phase of development, which would also afford an interested intern opportunities for program development and evaluation.

Substance Use Disorders (SUD) Outpatient Program

Frank Angelini, PhD and Gabriel Longhi, PsyD

The Outpatient SUD program rotation provides either a half- or full-time rotation for interns to learn about the assessment and treatment of substance use disorders. The program provides services that are accessible and relevant to each veterans' readiness to change and respectful of individual treatment goals. Treatment integrates Motivational Enhancement and CBT model, particularly emphasizing Community Reinforcement (CRA). The program treats both male and female veterans through individual and group psychotherapy (process and psychoeducational). Interns are integrated members of the

multidisciplinary treatment team and participate in daily team meetings. Interns can participate in psychological assessment and screening, program development and evaluations, treatment planning, family and system level interventions, caregiver support, staff education and training, and behavior management consultation. If interested, interns will have the opportunity to receive extensive supervision of motivation interviewing, including coding of recordings.

Leadership and MH Administration

Danielle Schade, PsyD and Justin Charles, PsyD

Many psychologists have little formal training or exposure to leadership and program administration practice or literature, and this rotation seeks to address some of these common training or experience gaps. This rotation offers an introduction to leadership and administration for psychologists in the VA setting and is a good fit for interns who may aspire to leadership roles or who may be interested in topics like program development/evaluation. There are three main goals of the rotation. One goal is for interns to understand servant leadership, a model of ethical, evidence-based leadership. This occurs through review of professional literature, participation in leadership meetings and committees, and shadowing of your supervisor. Another primary goal is for interns to understand systems (e.g., functioning, change processes, and indicators). This is accomplished through use of VA handbooks and directives, data dashboards, interactions with mental health leaders, and completion of a rotation project. Significant flexibility is granted to interns in developing the project, and interns are encouraged to choose one that incorporates their own interests while also addressing VA needs. Finally, because clinical skills are vitally important, the intern spends at least 25% of their time either on the Acute Inpatient Psychiatry Unit or working with older adults in the Community Living Center.

Primary Care-Mental Health Integration (PCMHI)

Frank Mirarchi, PsyD and Elizabeth Phelps, PsyD

Behavioral health services are well integrated into primary care practice following the Patient Centered Medical Home (referred to in the VA as Patient Aligned Care Team (PACT)) model of treatment. Interns will have the opportunity to provide consultation to primary care providers as well as provide scheduled and urgent evaluations of patients with a wide range of mental and behavioral health issues. Interns will be responsible for evaluating and monitoring patients, providing education and support, and collaboratively making appropriate care decision along with primary care providers. Measurement-based care will be emphasized, and interns will apply this in the context of evidence-based treatment modalities for primary care veterans with depression, anxiety, alcohol misuse, subsyndromal PTSD, chronic pain, and insomnia. Brief psychological care is also emphasized (i.e. 6 sessions or less). Interns may also engaged in psycho-education groups, including Pain University, Pain School, CBT-I, MOVE, Mind-Over Mood, as appropriate and available to intern training goals. Participation in health psychology based psychological evaluations (i.e. Bariatric Surgery, Organ Transplant, Spinal Cord Stimulator) is encouraged as available during the rotation for the intern.

Biofeedback Clinic

Ron Pekala, Ph.D.

In this half-time rotation the intern learns how to: a) conduct biofeedback intakes, assessments, and biofeedback training/therapy; b) run several relaxation/stress management groups demonstrating different stress management techniques to patients; c) do hypnotic assessments and self-hypnosis training with selected patients; and d) integrate the above into one's own style of doing therapy. The biofeedback training experience consists of learning how to operate electromyographic (EMG), skin temperature, skin conductance, and heart rate variability (HRV) biofeedback instrumentation. Observation and then experience in doing initial assessment interviews, psychophysiological assessments, and/or individual biofeedback training/therapy is taught, along with the theory underlying the use of biofeedback instrumentation and how to integrate biofeedback into one's own therapeutic style. A model for understanding hypnosis, hypnotic assessment, and integrating self-hypnosis training into psychotherapy is also taught.

Psychosocial Rehabilitation and Recovery Center (PRRC)

Joseph Reichmann, Psy.D.

The PRRC is an outpatient specialty mental health program designed to support recovery and integration into meaningful self-determined community roles for veterans with severe mental illness and functional impairment. The mission of the PRRC is to assist veterans with learning skills to self-manage their mental illness and define a personal vision for their future based on strengths, personal values, and desired social roles. Available as a half rotation, the intern will partner with a multidisciplinary team (which includes peer support, social work, occupational therapy, recreational therapy, and nursing) to provide individual, group, and community based services from a recovery-oriented framework. Interns will have a solid understanding of the recovery model and supporting research. Interns will learn how to effectively intervene with veterans and will refine or further develop skills in clinical interviewing/assessment, individual and group therapy, as well as recovery-oriented treatment planning and care coordination. As noted above, the intern will have ample opportunity to gain experience in multiple EBP's, specifically, Social Skills Training (SST), Recovery Oriented Cognitive Therapy (CT-R) and Cognitive Behavioral Therapy for Psychosis (CBT-P). Each intern will gain exposure in program outreach, development, management, and evaluation. The PRRC rotation will provide the intern with the unique opportunity to participate in, or implement, creative and non-traditional interventions with cross-discipline collaboration. Interns who are interested in personality assessment will also have ample opportunity to complete and interpret various measures on this rotation.

Home-Based Primary Care (HBPC)

Christy Rothermel, PhD

Serving Veterans with chronic medical conditions who are home-bound, this half-time rotation provides unique opportunities to integrate behavioral medicine with geropsychology in a Veteran's home or via Telehealth. As such, a biopsychosocial approach to treatment is emphasized and importance is placed on understanding the relationship between physical, cognitive/neurological, and emotional and/or psychological problems towards provision of holistic and individualized care. Intern responsibilities will also include weekly participation in the HBPC interdisciplinary team meeting, providing brief psychological and/or cognitive assessment, treatment planning, caregiver consultation/intervention, and staff consultation/education/training. Interventions that interns have exposure to, range from CBT and problem-solving based interventions to supportive/reminiscent/grief therapy. Finally, completion of a rotation project of their own design for the purpose of program development relevant to HBPC is also required. As collaboration between the intern and HBPC staff members of varied disciplines is expected, it provides additional opportunities for the intern in the area of program development.

Combat PTSD Residential Program

Thomas Bortner, Psy.D., Debra Boyd, Ph.D., Danielle Farabaugh, Psy.D., and Shannon Schiavoni, Psy.D.

Housed in the domiciliary, this full-time rotation offers training in intensive individual and group psychotherapy for combat Veterans diagnosed with PTSD. While the program is not considered a dual-diagnosis program, the majority of Veterans admitted to the program carry a comorbid substance-use diagnosis. Interns provide individual psychotherapy and participate in facilitation and co-facilitation of trauma-focused psychotherapy groups. Interns will receive exposure to addressing issues such as guilt, loss, anger, moral injury, and relationship concerns using evidence-based treatments including Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Eye Movement Desensitization and Reprocessing (EMDR), and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Interns may also have additional opportunities to provide Cognitive-Behavioral Therapy for Insomnia (CBT-I), DBT/STAIR skills, Acceptance and Commitment Therapy (ACT), Seeking Safety, or EXRP. The program includes psychoeducational classes on many topics related to PTSD and war trauma. Interns are given the opportunity to lead one or more of the offered psychoeducational classes as well as develop and provide

additional related curriculum. Interns will also receive training in measurement based care and assessment of PTSD and related disorders. The veterans are men and women of all wars and eras, including Vietnam, Grenada, Lebanon, Panama, Persian Gulf, Somalia, Bosnia, Iraq, and Afghanistan. The therapeutic work environment is often intense but rewarding.

POWER Program

Suzilene Board, PsyD and Ashley Sutton, PsyD

One of only two residential dual-diagnosis treatment programs within the entire VA healthcare system, the POWER program serves female veterans with comorbid mental health and substance use disorders. Trauma is often a presenting concern of the female veterans who enter the program, although it is not a requirement. The program's mission is to prepare female veterans for a lifestyle that supports continued recovery of the mind, body, and spirit. POWER is an acronym for the "Power of Women Embracing Recovery". Interns provide individual and group psychotherapy (including process and psychoeducational groups) to residents on the unit. Groups offered on the unit include Seeking Safety, DBT, CBT-SUD, Biofeedback, STAIR, Mindfulness, Spirituality, and Anger Management. Interns will utilize evidence-based treatments including CPT and CBT-SUD. Trauma work includes addressing issues such as guilt, loss, anger, and relationship concerns.

SUD DOMICILIARY Program

Stephanie Adam, PsyD

This residential rotation offers training in individual and group psychotherapy, crisis intervention, treatment planning, as well as structured and psychoeducational groups for veterans in a residential setting struggling with substance use disorders and co-occurring mental health issues. Group offerings include process-oriented, DBT, CBT, anger management, communication skills, and positive psychology. Interdisciplinary measurement-based treatment planning including recovery oriented goals, objectives, and interventions are core components of the SUD DOM program. Interns are heavily involved in the multidisciplinary treatment team, including completion of intake and discharge evaluations and assessments, caregiver support, family/system level interventions, and treatment planning for the veterans. Interns will also be able to be involved in research, staff education/training, and behavior management consultation.

Neuropsychology I

Benjamin Gliko, PsyD, ABPP; Jason Kaplan, PsyD, ABPP; and David Tsai, PhD, ABPP

The Neuropsychology I rotation is a half-time required clinical experience for neuropsychology interns only. It is designed to familiarize the neuropsychology intern with the administration, scoring, and interpretation of neuropsychological test batteries. Interns will assess patients with a wide range of cognitive deficits including TBI, neurodegenerative diseases, neurological disorders (e.g. stroke, seizure disorders), substance use disorders, attention-based disorders, neuropsychiatric disorders (e.g. schizophrenia, PTSD), and learning disabilities. During the rotation, the intern is expected to develop proficiency in administration and scoring a diverse set of neuropsychological tests, clinical interviewing within the context of neuropsychological evaluations, neuropsychological test interpretation, neuropsychological report writing, provision of feedback, and time management. Interns attend a weekly Neuropsychology Seminar that addresses contemporary issues in Neuropsychology throughout the course of the entire internship year. Additionally, the opportunity to view human brain specimens is available.

Neuropsychology II

Benjamin Gliko, PsyD, ABPP; Jason Kaplan, PsyD, ABPP; and David Tsai, PhD, ABPP

During this full-time rotation, neuropsychology interns are expected to display a more proficient ability to complete the requirements of Neuropsychology I rotation. Additionally, interns will be expected to carry 1-

2 individual neurocognitive rehabilitation therapy (Cog Rehab) cases and co-facilitate a weekly CogSMART-based group. Emphasis is placed on the development of compensatory strategies to help individuals reach identified goals or improve functional abilities.

Additional Activities

Enrichment Experience

Interns have the option to elect an enrichment experience to further individualize and augment the clinical training received during the course of the internship year. Enrichment experiences are 2-4 hours per week and can be proposed throughout the training year. Time dedicated to the experience is to be navigated with the intern and the intern's rotation supervisors. The intern is responsible for finding supervision, negotiating one's time with rotation supervisors, and providing this plan to the training committee. Interns are further responsible for ensuring all requirements and competencies are met on rotation and for the selected experience. Enrichment experiences can be elective or mandatory if needed to fulfill remediation.

Examples of enrichment experiences are as follows: research, assessment, continued focus on a particular EBP, couples/family, Telemental health/VVC, Admin/Leadership, 59A, Group therapy, Psychological Assessment, etc.

Interns cannot complete an enrichment experience in a particular specialty area if they are completing 50% of their year in that specialty area (i.e. Neuropsych, SUD).

Cognitive Processing Therapy (CPT) Experience

Interns have the opportunity to partake in the VA CPT roll-out training and consultation as part of their training year. Interested interns will be provided with the opportunity to attend the 2-day CPT training and attend 6 months of weekly CPT consultation calls. If an intern completes all requirements of the roll-out (i.e. completing 2 cases and attending 20 active consultation sessions), they will be listed as a CPT provider once licensed. Interns will also receive training on the CAPS-5 and identifying criterion A stressors. Interns may elect to complete this experience as an enrichment experience or as part of their rotations during the year. This opportunity is not extended to all interns and is limited to trainees who have future career goals to work with trauma or general mental health.

Mentoring

Interns have the optional opportunity to work with a staff psychologist mentor. This is an optional, minimally-structured and non-evaluative professional relationship that offers the opportunity for sharing professional interests beyond the focus of a specific rotation or work unit. Mentoring may assist interns in focusing goals for future work, choosing career paths, or simply enrich the internship. Interns may elect to participate in this at any point during their training year.

Other

Interns share in the activities of staff psychologists and other professional personnel throughout the Medical Center. These programs provide an opportunity for interns to interact with the multidisciplinary personnel. Interns may serve as moderators or resources to aid staff in understanding patients' individual and group behavior or in developing skills so that staff can function better in their assigned responsibilities.

Interns may attend any seminar, lecture, and training activity at the Medical Center, as long as these activities do not interfere with the core internship training activities. CVAMC Psychology Service is an APA-accredited sponsor of Continuing Education and conducts a number of training activities throughout the year.

Requirements for Completion

Interns must complete 2080 professional hours within the 52-week training year in order to graduate from the internship. Interns maintain a record of their hours using Time-2-Track, which the internship provides a subscription to for each intern. Accrued paid leave times and authorized absences for professional development activities are counted toward the 2080 hour requirement. Interns must successfully complete at least 500 hours (25%) of direct patient contact, at least 200 hours of supervision, and at least 100 hours of didactic training. Extensions of the training year may be allowed under appropriate circumstances such as family or medical leave.

As described above, by end of training (3rd rotation evaluations), interns will have achieved a rating of 4 or higher on all profession-wide competencies and 3 or higher on all relevant site-specific competencies.

Facility and Training Resources

Interns have full access to the same level of clerical and technical support as staff psychologists. They are provided computers with access to the hospital network, Microsoft Office, and access to the internet. Printers and secure fax machines are readily available in all treatment areas. Support staff is available to assist interns in scheduling appointments, administrative tasks, coordination of multimedia equipment, and negotiating the Medical Center's policies and procedures. Interns have access to technical support for their computers and telephone through the Information Technology Service.

Training resources include video, audio and reproduction equipment, along with an excellent library with a wealth of mental health related books, computer literature searches, periodicals and audio/video holdings, and an almost unlimited access to materials available through interlibrary loans. Training resources also comprise of Educational Center facilities for meeting, seminars, and training. Interns are strongly encouraged to complete their dissertations so they may be job-ready and begin documenting hours for licensure immediately following completion of internship and graduation.

The VA network has a number of psychological measures available to be computer-administered. In addition, the department has an extensive bank of tests and materials. Professional journals and other resources are available electronically. Multimedia equipment, including video and audio devices, can be accessed through Medical Media Service.

Interns have dedicated office space on the 2nd floor of Building 57, which houses the outpatient mental health services. Two of these offices are shared offices, but are spacious and equipped with two computer workstations and separate phone lines, while the other three intern offices are singles. Additional offices are available on the individual rotations for interns to use. Although offices are always in high demand, interns are consistently provided with sufficient clinical and administrative space. Conference rooms and group therapy rooms throughout the Medical Center are used for group sessions and training seminars.

Administrative Policies and Procedures

The Coatesville VA Medical Center's policy on Authorized Leave is consistent with the national standard. You are welcome to discuss this with the Director of Training and Chief of Psychology.

Due Process: All trainees are afforded the right to due process in matters of problematic behavior and grievances. A due process document is distributed to every intern during orientation and reviewed with them subsequently. A copy of our due process policy is available on request.

Privacy policy: We collect no personal information from you when you visit our web site.

Self-Disclosure: We do not require interns to disclose personal information to their clinical supervisors except in cases where personal issues may be adversely affecting an intern's performance and such information is necessary to address these difficulties.

No tolerance policy: The Coatesville VA Medical Center strives to maintain a culture of respect for all, and policies are in place that include “no tolerance” for remarks, behavior or other interpersonal conduct that convey disrespect for others.

Training faculty

Stephanie A. Adam, PsyD

Doctoral Program: Immaculata University

Doctoral Internship: Reading Hospital and Medical Center, Reading, PA

Postdoctoral Fellowship: Larned State Hospital Forensic Program, Larned, KS

Duties: Clinical psychologist and team leader for the homeless domiciliary program, supervisor to RCT staff and interns, serves on the disruptive behavior committee.

Clinical Interests: Personality assessment, individual and group therapy, positive psychology, forensic assessment, and cognitive behavior therapy.

Personal Interests: Spending time with family and friends, dogs, travel, cars, art, hiking, skiing, music, and living the best life.

Frank Angelini, PhD

Doctoral Program: University of Pittsburgh

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Completed postdoc hours at Coatesville VA Medical Center

Duties: Program Manager of the Outpatient Substance Use Disorder (SUD) Treatment Program. He has provided services addressing substance use and misuse for 25 years. He is on the faculty of Villanova University and West Chester University and is a member of the Constructivist Psychology Network and the Motivational Interviewing Network of Trainers.

Clinical interests: Substance abuse, motivational interviewing, constructivism

Amy Becker, PsyD

Doctoral Program: Arizona School of Professional Psychology at Argosy University, Phoenix, 2018

Doctoral Internship: Northern Arizona VA Healthcare System

Postdoctoral Fellowship: Togus VA (Maine) Healthcare System

Duties: Home Based Primary Care (HBPC)/Community Living Center (CLC) Graduate Level Psychologist

Clinical Interests: Geropsychology, dementia care, reminiscence therapy, caregiver support, working with other members of interdisciplinary care teams to utilize STAR-VA program within the CLC, applying Snoozelen multisensory tools in to the therapeutic environment, providing support to Veterans and caregivers who are homebound, and utilizing biopsychosocial / Whole Health models of care

Personal Interests: Photography, organizing, reading, soccer, spending time with family, traveling, and exploring new places, both local and abroad.

Suzilene Board, PsyD

Doctoral Program: Widener University, 2001

Doctoral Internship: Widener University Captive Internship, Elwyn, Inc.; North Philadelphia Health System

Postdoctoral Fellowship: N/A

Duties: Team Leader for Power program, Chair and secretary of Psychology Professional Standards Board

Clinical Interests: Women's substance abuse and mental health, cognitive behavioral therapy, cognitive processing therapy, treating affective disorders including (anxiety, depression), cultural competence and diversity issues

Personal Interests: Fitness (certified Les Mills instructor), spending time with family and friends, reading, shopping.

Thomas A. Bortner, PsyD

Doctoral Program: La Salle University, 2008

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Completed postdoctoral hours as a staff clinician at Mathom House of Edison Court, Inc.

Duties: Staff Psychologist (Residential Combat PTSD Program), CE committee member, Caregiver support committee member, DBT team member

Clinical Interests: Trauma, anxiety disorders, utilization of EBPs when warranted (Certified CPT and PE provider)

Personal Interests: Spending time with family, music, running, biking, spending time outdoors, travelling, Philadelphia Eagles

Debra Boyd, PhD

Doctoral Program: Lehigh University, 2011

Doctoral Internship: Coatesville VA Medical center

Postdoctoral Fellowship: Exton Behavioral Health and Rehabilitation

Duties: Combat PTSD Residential Program Psychologist

Clinical Interests: Combat and childhood trauma, EBP for PTSD and Depression, moral injury and traumatic loss, grief, anger management

Personal Interests: Spending time with my family, reading, exercise

Justin Charles, PsyD

Doctoral Program: Wheaton Graduate School, 2012

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Completed postdoctoral hours as staff psychologist at Providence Behavioral Health, Lancaster, PA

Duties: Assistant Chief of Psychology Services, including management of BHIP, PCT, Biofeedback, Neuropsychology, and Work Restoration

Clinical Interests: Geropsychology, Bereavement, Program Development, Leadership.

Personal Interests: Hiking, attempting to keep up with two energetic sons, podcasts, non-profit advocacy and involvement, Ethiopia.

Dagmawi Dagnev PsyD

Doctoral Program: Widener University, 2014

Doctoral Internship: AIDS Care Group (outside of Philadelphia PA)

Postdoctoral Fellowship: AIDS Care Group

Duties: BHIP Psychologist; Local Telemental Health Champion

Clinical Interests: Generalist with interest in outpatient individual therapy; Evidence based therapies (CBT, PE, CPT, CBT-I, MI*, brief psychodynamic tx); Culturally-minded application of treatments; Integrative mental health/primary care/social work approach to care; Military racial trauma

Personal Interests: Spending time with family; Exercising; Social justice; Environmental stewardship; Contributing to the sense of community at the work place

Danielle Farabaugh, PsyD

Doctoral Program: La Salle University, 2007

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Center for Cognitive Therapy/Psychopathology Research Unit, Dept. of Psychiatry, University of Pennsylvania

Duties: Team Leader/Staff Psychologist in PTSD RRTP, Member of Clinical Review Board for Comprehensive Caregiver Support Program, Alternate Member of IRB and R&D.

Clinical Interests: PTSD and trauma, anxiety disorders, CBT, effectiveness of EBPs for PTSD, opiate use disorders

Personal Interests: traveling, sea life, snorkeling, animals, spending time with family

Benjamin T. Gliko, PsyD, ABPP

Doctoral Program: Nova Southeastern University, 2004

Doctoral Internship: Coatesville Veterans Affairs Medical Center (CVAMC)

Postdoctoral Fellowship: 2-year postdoctoral fellowship in Neuropsychology at the Neurobehavioral Institute of New Jersey

Duties: Neuropsychologist

Clinical Interests: neuropsychological assessment; personality/psychological assessment; functional neuroanatomy; personality theory; existential psychology; PI for the Neuropsychology Database research project

Personal Interests: all things music; playing the drums; following Philadelphia sports teams; reading nonfiction (especially the interface between religion/spirituality and science/brain functioning)

Laura Hertz, PhD

Doctoral Program: Temple University

Doctoral Internship: Coatesville VA Medical Center

Postdoctoral Fellowship: Hours completed at Coatesville VA Medical Center

Duties: Individual, group, and couple therapy. Diagnostic interviews. Intern Supervision. Psychologist on the PTSD Clinical Team. Member of the Training Committee, Continuing Education Committee, Caregiver Advisory Council, and Visual Impairment Services Team. EAP provider.

Clinical Interests: Trauma, grief/loss, spirituality, relationship issues, vocational issues, and qualitative research.

Personal Interests: Travel! Food! Animals! Generally, meeting new people and having new experiences.

Jason M. Kaplan, PsyD, ABPP-CN

Doctoral Program: Azusa Pacific University, 2014

Doctoral Internship: Coatesville VA Medical Center, Neuropsychology Track

Postdoctoral Fellowship: VA North Texas Healthcare System, Neuropsychology

Duties: Neuropsychological Assessment, Cognitive Rehabilitation

Clinical Interests: Assessment of neurocognitive disorders and psychiatric comorbidities including dementia, acquired brain injury, neurodevelopmental disorders, and other CNS conditions. Capacity assessment. Promoting wellness through consultation and therapeutic feedback. Cognitive rehabilitation emphasizing compensatory techniques to improve functioning. Supervision and learning from trainees!

Personal Interests: Running, exploring the outdoors, gastronomy, music, traveling with my family, trying (but mostly failing) to teach my cat tricks

Gabriel Longhi, PsyD

Doctoral Program: Widener University, Institute for Graduate Clinical Psychology, 1999

Doctoral Internship: 1. Crozer Chester Medical center, Substance Abuse Outpatient Program;

2. Widener University Student and Community Counseling Center

Postdoctoral Fellowship: Completed postdoctoral hours as an Associate Psychologist (Spanish Speaking) at Hutchings Psychiatric Center in Syracuse, NY

Duties: SUD/PTSD Psychologist, Member of the Coatesville VA Psychology Professional Standards Board, co-facilitator for the Peer Consultation group for Interns, and Chair of the Diversity Sub-Committee

Clinical Interests: PTSD/ trauma work, dissociative disorders, Substance Abuse Counseling, Diversity training, Clinical Interviewing and assessment of differential diagnosis, Couples/Marital Therapy, Family Therapy, supervision, and domestic violence interventions for victims and perpetrators

Personal Interests: Back-packing, hiking, canoeing/ kayaking, jogging, weight-lifting, spending time with family/ kids, movies

Frank Mirarchi, PsyD

Doctoral Program: Philadelphia College of Osteopathic Medicine, 2014

Doctoral Internship: Center for Brief Therapy at the Philadelphia College of Osteopathic Medicine

Postdoctoral Fellowship: Completed postdoctoral hours as a post-doctoral clinician and assistant clinical director of Empowerment Resource Associates, Inc
Duties: PCMH psychology, Health Behavior Coordinator; Pain Management Services and Motivational Interviewing training
Clinical Interests: Integration of mental health care into primary care medical clinics, behavioral health consultant model of care; Creation of new groups on campus within the WHOLE HEALTH model of care; Cognitive Behavioral Therapy including CBT for Chronic Pain and Depression; Motivational Interviewing and other motivational treatment to promote health behavior change.
Personal Interests: Sports, Movies, Foodie, Fantasy Football, reading fiction especially classics and fantasy novels, outdoor activity (i.e. hiking) and spending time with family

Laura L. Mowery, PsyD

Doctoral Program: Ferkauf Graduate School of Psychology, Yeshiva University, 2009
Doctoral Internship: NY Harbor Healthcare System, Brooklyn VA Medical Center Campus
Postdoctoral Fellowship: informal- Phoenix House Foundation, Military Services Program, New York
Duties: Staff psychologist on the PTSD Clinical Team, Local EBP Coordinator; Secretary for Psychology Professional Standards Board
Clinical Interests: Trauma, Utilizing EBPs with complex PTSD, relationship between attachment styles and belief systems, beliefs and the mate-selection process, ACT, EBPs via telehealth
Personal Interests: Cooking/eating (especially at new restaurants), spending time with family, violin, music, reading, music

Ron Pekala, PhD

Doctoral Program: Michigan State University (1981)
Doctoral Internship: Pittsburgh VA Consortium
Duties: Director, Biofeedback Clinic Psychologist
Clinical Interests: Anxiety, anger, panic, headaches, psychophysiological disorders, hypnosis, stress management, and breathing retraining.
(Due to the Covid-19 virus, no biofeedback nor hypnotic assessments/trainings are currently being performed; rather all interventions are psychoeducational, relaxational, and stress and coping skill management related, and completed via telephone or teleconferencing.)
Research Interests: Eighty publications and numerous presentations on hypnosis, subjective experience, consciousness and the mind, psychophysiology.
Personal Interests: Consciousness, meditation, noetics, epistemology and metaphysics, and of course, the grandkids, James and Ella.

Elizabeth A. Phelps, PsyD

Doctoral Program: Philadelphia College of Osteopathic Medicine, 2016
Doctoral Internship: Roudebush (Indianapolis) VA Medical Center
Postdoctoral Fellowship: Completed postdoctoral hours as a staff psychologist at Coatesville VA Medical Center
Duties: PCMH psychologist, Assistant Director of Training, CBT-I national consultant, Site PI on grant funded, multi-site study examining alcoholism and insomnia
Clinical Interests: Dr. Phelps' theoretical orientation is primarily cognitive/behavioral. Her focus is on comprehensive biopsychosocial assessments and treatments within the primary care setting. She has a passion for evaluating and treating sleep disorders. She is a strong proponent of the integration of mental health professionals into primary care medical clinics, with a strong emphasis on the behavioral health consultant model of care. She has been intricately involved in the creation and implementation of the WHOLE HEALTH model of care at CVAMC, which includes the creation of new groups and clubs around this model to help veteran's improve all areas of their health. She is currently in the process of obtaining ABPP certification in Clinical Health Psychology.
Personal Interests: Baseball, food, running (especially the Broad Street run), spending time with her family and ensuring a healthy work-life balance for herself and all trainees.

Joseph F. Reichmann, PsyD

Doctoral Program: Marywood University, 2015

Doctoral Internship: United States Navy, Walter Reed National Military Medical Center

Postdoctoral Fellowship: Completed postdoctoral hours as a staff psychologist at Naval Medical Center Portsmouth

Duties: Program Manager and Psychologist for the Psychosocial Rehabilitation and Recovery Center (PRRC), Employee Assistance Program (EAP) counselor.

Clinical Interests: Substance-Related and Addictive Disorders, Serious Mental Illness, Sleep-Wake Disorders, and creating as many clubs on the CVAMC campus as possible.

Personal Interests: Spending time with family (wife, son, & two doodles), fitness (especially CrossFit), snowboarding, Philadelphia (Eagles – go birds!), food, tattoos, and travel.

Christy Rothermel, PhD

Doctoral Program: Lehigh University, 2007

Doctoral Internship: Friends Hospital

Postdoctoral Fellowship: Completed postdoctoral hours at Graterford State Correctional Institution (now SCI-Phoenix)

Duties: HBPC psychology, including psychotherapy, cognitive and mental health related assessment/evaluations, and consultation to HBPC treatment team; Psychology Behavioral Assessments for SUD residential treatment program; supervision of not yet licensed staff and/or psychology interns

Clinical Interests: Integration of medical and mental health care; behavioral health consultation; end of life issues; mental health related geriatric care

Personal Interests: spending time with my family and friends; the Phillies and the Eagles; reading for fun; day trips/vacations

Danielle Schade, PsyD

Doctoral Program: Georgia School of Professional Psychology, 2004

Doctoral Internship: Coatesville VAMC

Postdoctoral Fellowship: Completed postdoctoral hours as a staff psychologist at Coatesville VAMC

Duties: Chief of Psychology Service; Staff psychologist for Acute Inpatient Psychiatry Unit; Co-chair Disruptive Behavior Committee; Instructor for Prevention and Management of Disruptive Behavior

Clinical Interests: Severe mental illness; psychosocial rehabilitation and recovery; professional ethics; diversity

Personal Interests: Cooking, learning Arabic, exercise in the form of chasing after and playing with twin sons

Shannon P. Schiavoni, PsyD

Doctoral Program: Nova Southeastern University, 2018

Doctoral Internship: Coatesville VAMC

Postdoctoral Fellowship: Center for the Treatment and Study of Anxiety at University of Pennsylvania

Duties: Combat PTSD residential Psychologist

Clinical Interests: Treatment of PTSD, OCD and related disorders (e.g. trichotillomania, BDD), anxiety, and eating disorders. Formal EBP training in CPT, EXRP, and PE. My research interests include diversity, eating disorders, and mental health advocacy training.

Personal Interests: Food, barre, figure skating, hiking, peloton, and spending time with her family and pets.

Ashley Sutton, PsyD

Doctoral Program: Rutgers Graduate School of Applied and Professional Psychology (GSAPP), 2018

Doctoral Internship: Pittsburgh VA Medical Center

Postdoctoral Fellowship: Pittsburgh VA Medical Center, Focus in Substance Use Disorders

Duties: Staff psychologist in the Residential Rehabilitation Treatment Programs (RRTP or Domiciliary/“Dom”), conduct Behavioral Assessments for RRTP, individual and group therapy in RRTP (e.g., CBT-SUD, CPT, DBT, Seeking Safety)

Clinical Interests: Dual diagnosis SUD and PTSD, Cognitive Processing Therapy, working with specific subsets of the military population (e.g., women Veterans, LGBT Veterans), decreasing stigma around SUD, Self-Compassion

Personal Interests: Reading, boxing, yoga, spending time with loved ones (especially her cats)

Jeffrey Schweitzer, PhD

Doctoral Program: Miami University, 2014

Doctoral Internship: SUNY Upstate Medical University

Postdoctoral Fellowship: None

Duties: BHIP psychologist, DBT team member, qualitative research of recovery-oriented services.

Clinical Interests: Qualitative research in the areas of narrative-phenomenological methodologies, dreams and imagination, and transformational experiences. Healing from trauma and loss and experiential-depth psychotherapies. EBP proficiencies include ACT/DBT/PE/IBCT.

Personal Interests: Music, cooking, poetry, hiking, running, golf

Carmella Tress, PsyD

Doctoral Program: Philadelphia College of Osteopathic Medicine, 2014

Doctoral Internship: Oscar G. Johnson VA Medical Center, Michigan

Postdoctoral Fellowship: University of Pennsylvania, Aaron T. Beck Psychopathology Research Center, Perelman School of Medicine

Duties: BHIP Psychologist, Facilitates BHIP Consult process, DBT Team Member, Regional Trainer and Training Consultant for Acceptance and Commitment Therapy for Depression, National Training Consultant for Cognitive Behavioral Therapy for Depression.

Clinical Interests: Provision of evidence-based practices focusing on Acceptance and Commitment Therapy; Cognitive Behavioral Therapy; Exposure-based therapy including Exposure with Response Prevention for OCD and Prolonged Exposure Therapy; Dialectical Behavior Therapy. Clinical Education in Acceptance and Commitment Therapy (including teaching at PCOM). Integrating Recovery-oriented approaches to mental health care and the promotion of wellness, including facilitating Shared Decision Making. Organizational Psychology including promoting Psychological Safety, effective communication, collaboration and wellness within teams/agencies.

Personal Interests: Spending time with her family and friends, Yoga, Cycling, her two Yorkies (Gerald and Franklin), listening to music and podcasts, & eating tasty food.

David Tsai, PhD, ABPP

Doctoral Program: Rosemead School of Psychology, Biola University, 1997

Doctoral Internship: Philhaven Hospital

Duties: Neuropsychologist; Committees: Psychology Continuing Education, Education Development Funds

Clinical Interests: Cultural issues in assessment

Personal Interests: Spending time with my wife and 3 children, reading Car & Driver and Consumer Reports magazines

Leanne Valentine, PhD

Doctoral Program: Georgia State University, 2008

Doctoral Internship: Coatesville VAMC

Postdoctoral Fellowship: Hours completed at CVAMC

Duties: CBOC Psychologist, Compensation and Pension exams

Clinical Interests: Trauma and anxiety-related disorders, chronic pain, insomnia

Personal Interests: Teenage daughter/volleyball, family, running, yoga, reading, gardening, cooking, school choice/education

Amanda S. Vaught, PsyD

Doctoral Program: PGSP-Stanford PsyD Consortium, 2012

Doctoral Internship: Gulf Coast VA Health Care System

Postdoctoral Fellowship: Southeast Louisiana Veterans Health Care System

Duties: BHIP Psychologist, DBT Team Lead, VISN 4 CPT Regional Trainer/Consultant Director of Psychology Training

Clinical Interests: PTSD and trauma-informed care, VA Provider of CPT, PE, and CBCT, DBT and treating suicidal behavior, eating disorder research, consultation, and treatment, evidence-based psychotherapy, evidence informed intervention, transdiagnostic approaches to treatment

Personal Interests: Spending time with my husband and three children, maintaining and enjoying older and newer friendships, visiting extended family, traveling, loving THE Philadelphia Eagles, and gummy bears

Catherine M. Caska Wallace, PhD

Doctoral Program: University of Utah, 2013

Doctoral Internship: VA Puget Sound Health Care System – Seattle Division

Postdoctoral Fellowship: VA Puget Sound Health Care System – Seattle Division; Couple & Family Health Fellowship; 2013-2014

Duties: Couple & Family Program Coordinator, and psychologist on the BHIP team, Coordinating the national dissemination of PTSD 101 for friends and family.

Clinical Interests: Couple therapy, family interventions, posttraumatic stress disorder, anxiety disorders, insomnia, integration of family and loved ones into mental health care, and education of staff and providers about building and offering family-based services broadly across disciplines and clinics. Creation of new clinical, educational, and training services across the hospital, especially as it relates to the Couple & Family Program, but also as it relates to expanding the evidence-based group interventions in the BHIP clinic. Clinically trained in Integrative Behavioral Couple Therapy, Cognitive Behavioral Conjoint Therapy for PTSD, Cognitive Processing Therapy, Prolonged Exposure Therapy, Exposure and Response Prevention for OCD, CBT for mood and anxiety disorders, CBT for insomnia, Dialectical Behavior Therapy, and the Unified Protocol for the Transdiagnostic Treatment of Emotional Disorders. Continues to publish on the emotional and health consequences of PTSD for military couples, as well as on the manner in which VA providers integrate family into care.

Personal Interests: Spending time with family and her dog, going on walks, coffee shops, the Yankees, food festivals, audio books, and staying up to date on the latest movies.

Recent Interns Listing

<u>Intern</u>	<u>Doctoral Program</u>
2020-2021	
Simone Arent	William James College
Nicole Coolbrith	William James College
Rachel Hughes	Palo Alto University
Laura Lesnewich	Rutgers University
Alyssa Minnick	University of North Carolina—Charlotte
Molly St. Denis	Rutgers University- Graduate School of Applied and Professional Psychology
2019-2020	
Cara Genbauffe	Rutgers University- Graduate School of Applied and Professional Psychology
Stephen Maitz	Chestnut Hill College
Alexander Puhalla	Temple University
Marnina Stimmel	Yeshiva University/Ferkhauf
Rebecca Yeh	La Salle University
2018-2019	
Justine Bates-Krakoff	Fairleigh Dickinson University
Joseph De Marco	Loyola University Maryland
Sara Honickman	Yeshiva University/Ferkhauf
Jessica Reinhard	Immaculata University
Rolf Ritchie	Bowling Green State University
2017-2018	
Gennaro DiCarlo	Chestnut Hill College
Kirsten Hunter	Fielding Graduate University
Elissa Jarvis	Regent University
Christine Lee	Yeshiva University/Ferkhauf
Shannon Schiavoni	Nova Southeastern University
2016-2017	
Alyson Negreira	Suffolk University
Amy Olzmann	Xavier University
Melanie Robbins	Indiana University
Brenton Roman	Loyola University Maryland
Averie Zdon	Antioch University
2015-2016	
Lindsay Anmuth	James Madison University
Briana Auman	Yeshiva University
Danielle Bosenbark	Drexel University
Alison Hoyt	Immaculata University
Yinchi Li	Chestnut Hill College

Trainee Outcomes, Support and Outcome Data

Internship Program Admissions

Date Program Tables are updated: 8/30/19

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:

The Coatesville Veterans Affairs Medical Center internship ascribes to the Practitioner-Scholar Model. We offer two training tracks: generalist and neuropsychology. Our patient population is exclusively adults, and predominantly male veterans. Interns work with multidisciplinary teams with a variety of age groups, presenting problems, and diagnoses, and in a wide variety of inpatient, outpatient, and residential settings. Intern duties involve a broad scope of practice including assessment, individual and group therapy, program development/evaluation, and provision of staff education and systems-level interventions.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:

Total Direct Contact Intervention Hours	N	Y	Amount: 0
Total Direct Contact Assessment Hours	N	Y	Amount: 0

Describe any other required minimum criteria used to screen applicants:

Applicants are expected to have clinical/practicum experience in working with an adult population.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Interns	\$28,418	
Annual Stipend/Salary for Half-time Interns	NA	
Program provides access to medical insurance for intern?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Coverage of domestic partner available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104	
Hours of Annual Paid Sick Leave	104	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other Benefits (please describe): As Federal employees, interns receive 10 federal holidays as paid time off. Interns are also granted 5 days of Approved Absence (not deducted from annual or sick leave) for attendance at professional conferences, postdoctoral or job interview, and/or dissertation defense. Interns are not required to carry separate liability/malpractice insurance.		

* Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2017-2020	
Total # of interns who were in the 3 cohorts	15	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	4	0
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	4	0
Psychiatric hospital	1	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	3	1
Not currently employed	0	1
Changed to another field	0	0
Other	0	0
Unknown	1	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position.